

FTR

Jinnah A Phillips
20 Fernwood Rd.
West Hartford, CT 06119
February 23, 2012

Senator Joe Crisco
Representative Bob Megna
Chairs Insurance Committee
State Capitol
Hartford, Connecticut

Dear Senator Crisco and Representative Megna,

As a Connecticut resident and a physician in our community, I am writing to express my concern about Senate bills 12 and 97, both of which would eliminate the reference to national clinical guidelines for breast MRI and therefore would enable every woman with dense breasts to obtain an MRI (in addition to an ultrasound) with no copay.

I do not believe that the benefits of this proposed change in the current language would justify the significant burden this would place on the health care system. The American Cancer Society has very reasonable, evidence-based and clear guidelines for the use of annual breast MRI—namely for women at very high risk (>20-25%) of developing breast cancer over their lifetimes. At this time, there is no good evidence for the use of breast MRI solely for the indication of evaluating dense breast tissue. Eliminating the reference to national clinical guidelines in these bills would be tantamount to the legislative community stating that there is no role for evidence or science in the formulation of sound and prudent healthcare policy.

MRI is not without potential risks. Breast MRI requires the administration of intravenous contrast. Lesions that are identified by MRI must be biopsied in order to establish benignity or malignancy, and therefore increased use of MRI would inevitably lead to an increase in ultrasound and MRI directed biopsies. MRI is also expensive, and when evaluated in the context of what truly makes a good screening test (simple, acceptable, high sensitivity, high specificity, reproducible, cost-effective, low risk-benefit ratio), MRI fails to meet several criteria for applicability to the general or even intermediate risk population.

MRI could be performed on every woman with dense breasts (>50% of the screening population), but it would create numerous undue burdens on an already overtaxed health care system. Are these tradeoffs that we really want to make?

Sincerely,

Jinnah A. Phillips, M.D.

Director of Breast Imaging, Jefferson Radiology
Division Chief of Breast Imaging, Hartford Hospital